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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/010776-Conf. #4084
		Filing Date	December 6, 2001
		First Named Inventor	Mark R. Randel
		Art Unit	2671
		Examiner Name	C. N. Vo
Total Number of Pages in This Submission		Attorney Docket Number	32767-00039USC1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION		
Signature	<i>Steven R. Greenfield</i>		
Printed name	Steven R. Greenfield		
Date	February 23, 2005	Reg. No.	38,166

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: February 23, 2005	Signature: <i>Carol Marsteller</i> Carol Marsteller

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Dated: February 23, 2005

Signature:

(Carol Marstaller)

Docket No.: 32767-00039USC1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Mark R. Randel

Application No.: 10/010776

Confirmation No.: 4084

Filed: December 6, 2001

Art Unit: 2671

For: LIGHTING AND SHADOWING METHODS
AND ARRANGEMENTS FOR USE IN
COMPUTER GRAPHIC
SIMULATIONS

Examiner: C. N. Vo

**REQUEST FOR REMAILING OF NOTICE OF ALLOWANCE
AND RESTARTING THE RESPONSE PERIOD**

MS Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant requests that the Notice of Allowability and Notice of Allowance be resent to Applicant. The last correspondence Applicant received from the U.S. Patent Office for this patent application was dated December 31, 2002.

Applicant checked the status of this application on PAIR in February, 2005 and noticed that a Notice of Allowability was mailed on June 16, 2003 and a Notice of Allowance was mailed on June 17, 2003. Applicant did not and has not received either document.

Applicant talked with Examiner Mark Zimmerman on February 22, 2005. Examiner Zimmerman indicated he would look into the matter and suggested the mailing of this Request.

As such, Applicant requests the resending of the Notice of Allowability; the resending of the Notice of Allowance and requests a restarting of the response period.

Dated: February 23, 2005

Respectfully submitted,

By 

Steven R. Greenfield

Registration No.: 38,166

JENKENS & GILCHRIST, A PROFESSIONAL
CORPORATION

1445 Ross Avenue, Suite 3200

Dallas, Texas 75202

(214) 855-4500

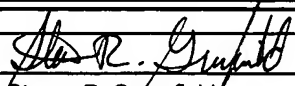
Attorneys For Applicant

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Complete if Known			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number			
		Filing Date			
		First Named Inventor			
		Examiner Name			
		Art Unit			
TOTAL AMOUNT OF PAYMENT		(\$)	0.00	Attorney Docket No.	32767-00039USC1

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>10-0447</u> Deposit Account Name: <u>Jenkins & Gilchrist, a Professional Corporation</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
_____ - 20 = _____		x _____	= _____		Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
_____ - 3 = _____		x _____	= _____				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____	= _____				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge): _____						Petition Fee _____	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	38,166
Name (Print/Type)	Steven R. Greenfield	Telephone	(214) 855-4789
		Date	February 23, 2005

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